

Leisure Activities Participation and Psychological Well-being during Social Isolation

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INTRODUCTION

The COVID-19 pandemic has brought many challenges to people's lives, including their ability to cope with stressful life events. Research demonstrates that mental health during the pandemic has declined,¹ so it was necessary to look at practical ways to cope with the stress of these changes.

Leisure activities (i.e., hobbies) have been shown to be useful at helping individuals cope during stressful life periods,² but there has not been a study that assessed the effects of leisure activities participation in the context of social isolation during the COVID-19 pandemic.

Here, we assess the relationship between participating in leisure activities and overall psychological well-being during social isolation. In addition, we examine the type of leisure activity that has the most positive effect on overall well-being and the psychological mechanisms for why the positive effect.

METHODS

PARTICIPANTS: $N = 200$ ($M_{age} = 19$ years; 155 F; 40 M)

Data was collected in January 2021 via an online survey:
LEISURE ACTIVITIES QUESTIONS:

- **Frequency** of leisure activities participation per week
- **Duration** of leisure activities participation

PSYCHOLOGICAL MECHANISMS:

- 1) **Personal control** (e.g., my leisure activities bring me a sense of control to my life)
- 2) **Self-efficacy** (e.g., I am able to stop myself from worrying when I am engaged in my hobbies)
- 3) **Social Affiliation** (e.g., my leisure activities have helped me meet new people through virtual platforms)
- 4) **Sense of Meaning** (e.g., I feel like I am contributing to making the world a better place when I am engaging in my hobbies)
- 5) **Flow** (e.g., I lose track of time when I am engaged in my hobbies)

OVERALL WELL-BEING SELF-REPORT MEASURES:

- Coronavirus Anxiety Scale (CAS)³
- WHO-5 Well-being Index (WHO-5)⁴
- Brief Resiliency Scale (BRS)⁵

DEMOGRAPHIC QUESTIONS

- Age
- Gender
- Ethnicity
- Disposable Income

RESULTS

A) What was the relationship between participation in leisure activities and overall well-being during social isolation?

Bivariate Correlational Analysis

Correlation Results for Frequency of Leisure Activities Participation (days per week) and Scores on Outcome Measures

	Leisure activities participation (days per week)	WHO-5	CAS	BRS
Leisure activities participation (days per week)	1	.15* (0.007, 0.279)	-.15* (-0.288, 0.004)	.06 (-0.078, 0.196)
WHO-5	197	1		
CAS	197	197	1	
BRS	197	197	197	1

Table 1

▶ The more participants engaged in leisure activities, the higher their sense of positive well-being.

▶ The more participants engaged in leisure activities, the lower their anxiety was around the virus.

▶ Resiliency was not affected by levels of leisure activities participation.

How often were participants who showed a positive effect engaging in an activity?

Engagement in leisure activities for a **minimum of three times a week** was associated with a significant effect on *decreasing anxiety* around the virus and *increasing sense of well-being*.

B) What type of leisure activity (i.e., physical or non-physical) had the most positive effect on overall well-being?

Hobby Category Classification:

1. *High* physical activity and *high* non-physical activity
2. *High* physical and *Low* non-physical activity
3. *Low* physical activity and *High* non-physical activity
4. *Low* physical and *Low* non-physical activity

Since most participants engaged in some level of both physical and non-physical leisure activities, we classified them into these four categories based on the degree (i.e., high and low) of physical and non-physical leisure activities they participated in during isolation.

Post Hoc Comparisons

Table 2

Means, Standard Deviations, and One-Way Analyses of Variance in Hobby Categories and the

Brief Resiliency Scale, WHO-5 Well-being Index, and Coronavirus Anxiety Scale

Measure	Hobby Category								F (1, 191)	η^2
	Low Physical and Low Non-Physical		Low Non-Physical and High Physical		High Non-Physical and Low Physical		High Physical and High Non-Physical			
	M	SD	M	SD	M	SD	M	SD		
BRS	3.04	0.68	3.29	0.71	2.80	0.65	3.07	.68	2.74*	.04
WHO-5	16.50	5.34	17.00	6.14	16.08	4.62	17.46	5.19	0.66	.01
CAS	6.74	3.82	6.88	3.33	7.21	2.90	8.17	4.10	1.84	.03

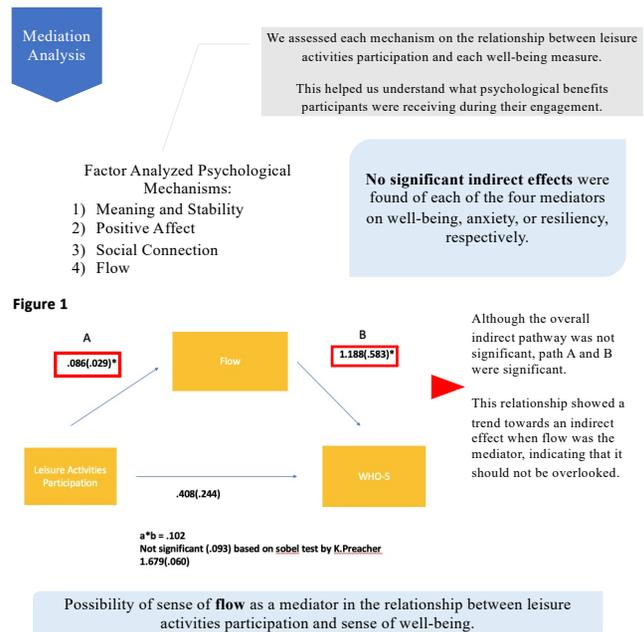
Note. $N = 197$. BRS = Brief Resiliency Scale; WHO-5 = WHO-5 Wellbeing Index; CAS =

Coronavirus Anxiety Scale.

* $p < .05$

Increased participation in **non-physical leisure activities** compared to high physical activities associated with increased **resiliency**

C) Which psychological mechanisms were involved in the association between leisure activities participation and overall well-being?



CONCLUSION

Previous research demonstrated participation in leisure activities, such as exercising or watching a comedy show, can help individuals cope with negative or stressful life events.^{6,7} We show that participation in leisure activities during the COVID-19 pandemic was associated with increased sense of well-being and decreased levels of anxiety around the virus for those who engaged in them for a minimum of three times per week. Participation in non-physical leisure activities (i.e., watching movies or knitting) may be a positive way to increase psychological well-being.

Although the psychological mechanisms for these benefits were unclear in this study, there does seem to be a possibility that flow may be mediator. Future research is recommended to confirm a definitive relationship.

REFERENCES

1. Twenge, J. & Joiner, T. (2020). U.S. census bureau-assessed prevalence of anxiety and depressive symptoms in 2019 and during the 2020 COVID-19 pandemic. *Depression and Anxiety*, 37(10), 954-956. <https://doi.org/10.1002/da.23077>
2. Fitzpatrick, H., Harris, C., & Drawwe, G. (2020). Living in the midst of fear: Depressive symptomatology among US adults during the COVID-19 pandemic. *Depression and Anxiety*, 37(10), 957-964. <https://doi.org/10.1002/da.23080>
3. Lee, S. (2020). Coronavirus Anxiety Scale: A brief mental health screener for COVID-19 related anxiety. *Death Studies*, 44(7), 393-401. <https://doi.org/10.1080/07481187.2020.1748481>
4. Topp, C.W., Ostergaard, S.D., Sondergaard, S., & Bech, P. (2015). The WHO-5 well-being index: A systematic review of the literature. *Psychotherapy and Psychosomatics*, 84(3), 167-176. <https://doi.org/10.1159/000376585>
5. Smith, B. W., Dalen, J., Wiggins, K., Tooley, E., Christopher, P., & Bernard, J. (2008). The brief resilience scale: assessing the ability to bounce back. *International Journal of Behavioral Medicine*, 15(3), 194-200. <https://doi.org/10.1080/1070550080222972>
6. Parker, A., Hetrick, S., Jorm, A., Mackinnon, A., McGorry, P., Yung, A., Scanlan, F., Stephens, J., Baird, S., Moller, B., & Purcell, R. (2016). The effectiveness of simple psychological and physical activity interventions for high prevalence mental health problems in young people: A factorial randomised controlled trial. *Journal of Affective Disorders*, 196, 200-209. <https://doi.org/10.1016/j.jad.2016.02.043>
7. Szabo, A. (2017). The acute effects of humor and exercise on mood and anxiety. *Journal of Leisure Research*, 35(2), 152-162. <https://doi.org/10.1080/00222216.2003.11949988>